



Moore County Health Department
Environmental Health Section
PO Box 279, Carthage, NC 28327
Phone (910) 947-6283
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APPLICATION FOR WELL PERMIT

Receipt #: _____ Parcel ID/LRK #: _____
Name: _____ Home Phone #: _____
Mailing Address: _____ Cell #: _____
Email: _____

WELL TYPE: Private Drinking _____ Agricultural _____ Irrigation _____
Geothermal Vertical _____ Monitor _____

Number of Connections: _____ **Number of People Served:** _____

Directions to property (911 address if possible): _____

State rules require the following: All wells must have a minimum of 20 ft. of concrete grout around the casing. Wells in which it is not possible to pour 20 ft. of grout will have to be approved by the North Carolina Department of Environmental and Natural Resources through a variance procedure before grouting.

Well drillers and pump installers are responsible for properly disinfecting wells after construction.

Homeowners must call the health department to request water samples after disinfection to insure the water supply is safe for human consumption.

Sketch out the house, septic tank area, underground storage tanks, etc. Well site should be located in a well drained area at least 100 ft. from possible sources of contamination.

Note: Well permit expires twelve (12) months from the date of issuance.

The well site will be located using the information provided by the property owners or their agent. The Health Department is not responsible for improper location of wells due to erroneous information provided to the Health Department, improper location of wells by the contractor, quality or quantity of the water supply.

Date: _____

Signature: _____
(Owner or Representative)